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Contributed Podium Presentations

PODIUM SESSION I

ADHERENCE & COMPLIANCE

AC1

USING TABLET PCS FOR SMOKING HAZARDS EDUCATION IN A METHADONE CLINIC

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OBJECTIVES: Up to 90% of the patients visiting methadone clinics smoke tobacco. Computer-mediated approaches to promote smoking cessation in this population have not been studied systematically. We conducted a pilot study on the feasibility of using tablet PCs for anti-smoking education in a methadone clinic. **METHOD:** We asked 35 methadone-treated patients who smoke to use a smoking hazards education program installed on a tablet PCs for approximately 40 minutes. We collected data on their smoking status and administered a smoking hazards knowledge questionnaire before and after the intervention. The knowledge questionnaire consisted of 35 basic statements about smoking with “true” or “false” options as a response. **RESULTS:** The sample consisted of 27 women (77.1%), 8 men; 45.4 ± 6.7 years old. Most of them were unemployed (27 subjects, 77.1%). They smoked for 23.2 ± 10.2 years and 25 subjects (71.4%) smoked 1 pack a day or more. According to Prochaska's Stage of Change Scale the majority of the patients were in precontemplation stage (23 subjects, 65.7%), the remaining patients were in the preparation or contemplation stage. Twenty patients (57.1%) discussed their smoking at least once with their doctors, although it was not connected with their knowledge about smoking hazards or their stage of change. As a result of computer-mediated education, their knowledge about smoking hazards significantly increased from 14.2 ± 2.9 points to 20.1 ± 3.0 points, $p < 0.0001$. For 27 subjects (77.1%) it was not complicated at all to use the computer. Most of the patients (32 persons, 91.4%) rated the program as good or excellent. **CONCLUSION:** Tablet PCs were feasible and effective means of education about smoking hazards and was very well accepted by the patients. Computer-assisted education may potentially be an effective health promotion tool for patients seen in methadone clinics.

AC2

THE PREVALENCE OF SUBJECTIVELY EXPERIENCED ADVERSE DRUG REACTIONS. A NATIONWIDE SURVEY IN SWEDEN

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OBJECTIVES: Spontaneous reporting systems where unexpected and/or severe adverse drug reactions (ADR) are reported

are important tools to monitor and estimate the occurrence of ADRs. However, from a public health perspective it is also important to obtain information on the proportion of the general population who experience ADRs. This study aims to analyze the prevalence of subjectively experienced ADRs in the Swedish population during a two week time period. **METHODS:** A postal survey on health, quality of life and use of drugs was done for a statistical population sample, 20–84 years, in Sweden, 2004/2005. A total of 4875 (61%) answered the questionnaire. In it, the respondent could name up to three drug treatments with subjectively experienced ADRs during the immediate two weeks prior to the completion of the questionnaire. All ADRs reported were reviewed and classified according to Meyler's Side Effects of Drugs. **RESULTS:** A total of 2856 (58.6%) reported use of prescription drugs. Of these users, 10.2% reported having experienced at least one ADR during the recall period. Prescription drug use was more common among women (66.6%) than among men (49.2%) but there were no differences between genders in the proportion reporting ADRs (10.8% and 9.1%, N.S.). Users aged 18–44 reported ADRs to a greater extent (13.0%) than users aged 45–64 (9.4%) and users aged 65–84 (8.3%) ($p < 0.05$). The highest prevalence of subjectively experienced ADRs was found among antidepressant (16.3%), antibiotics (13.8%) and analgesics (8.5%) users. Of all users, 5.5% reported nervous system ADRs; 3.8% and 1.0% reported gastrointestinal and cardiovascular ADRs, respectively. **CONCLUSIONS:** A substantial proportion of users of prescription drugs subjectively experienced ADRs during the period studied. Doctors, pharmacists and other health care professionals should be observant and thoroughly interview the patient about ADRs. Population-based prevalence studies of ADRs are an important complement to spontaneous reporting systems.

AC3

DETERMINANTS OF NON-COMPLIANCE WITH BISPHOSPHONATE THERAPY IN WOMEN WITH POST- MENOPAUSAL OSTEOPOROSIS

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OBJECTIVES: To identify determinants of non-compliance with bisphosphonate therapy in women with post-menopausal osteoporosis. **METHODS:** Data were obtained from the PHARMO Record Linkage System, which includes linked drug-dispensing records and hospital records for more than two million individuals in defined areas of The Netherlands. New female users of alendronate or risedronate in the period 1 January 1999–30 June 2004, aged ≥ 45 years or with diagnosed post-menopausal osteoporosis were included in the study. One-year compliance